

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

Association of State Democratic Chairs

ADDRESS (number and street)

430 S. Capitol Street SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00259481

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ann Fishman

Signature of Treasurer

Electronically Filed by Ann Fishman

Date

07

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Association of State Democratic Chairs

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		21955.31
(b) Cash on Hand at Beginning of Reporting Period .....	20007.18	
(c) Total Receipts (from Line 19) .....	20000.00	69650.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	40007.18	91605.31
7. Total Disbursements (from Line 31) .....	8513.06	60111.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	31494.12	31494.12
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Association of State Democratic Chairs

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....	0.00	100.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	100.00
12. Transfers From Affiliated/Other Party Committees .....	20000.00	69550.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	20000.00	69650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20000.00	69650.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8513.06	58611.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	8513.06	58611.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	1500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8513.06	60111.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8513.06	60111.19

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8513.06	58611.19
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8513.06	58611.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 13

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Dollars for Democrats

Mailing Address 430 S Capital St., SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: 12-01-02022-03664

Amount of Each Receipt this Period

20000.00

Transfer of Dues Payments

**SUBTOTAL** of Receipts This Page (optional) .....

20000.00

**TOTAL** This Period (last page this line number only) .....

20000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address PO Box 62071

City  
Baltimore

State  
MD

Zip Code  
21264-2071

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02009-03651

Date of Disbursement

/   /

Amount of Each Disbursement this Period

128.97

**B.**

Full Name (Last, First, Middle Initial)

Perkins Coie LLP

Mailing Address 1201 Third Avenue, 40th Floor

City  
Seattle

State  
WA

Zip Code  
98101-3099

Purpose of Disbursement  
Legal Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02010-03652

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3300.00

**C.**

Full Name (Last, First, Middle Initial)

Nexus Strategies, Inc

Mailing Address 434 Fayetteville Street  
Suite 2020

City  
Raleigh

State  
NC

Zip Code  
27601

Purpose of Disbursement  
General Consultant

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02011-03653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6928.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Ann Fishman

Mailing Address 10212 Windsor View

City  
Potomac

State  
MD

Zip Code  
20854

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02021-03663

Date of Disbursement

Amount of Each Disbursement this Period

110.00

**B.**

Full Name (Last, First, Middle Initial)

Kyle DeBeer

Mailing Address Apt 107  
3726 Connecticut Ave NW

City  
Washington

State  
DC

Zip Code  
20008

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02025-03676

Date of Disbursement

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Fishman

Mailing Address 10212 Windsor View

City  
Potomac

State  
MD

Zip Code  
20854

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02026-03677

Date of Disbursement

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

510.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
Newark

State  
NJ

Zip Code  
07101-0114

Purpose of Disbursement  
CC Payments - See Memo Items

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-0000

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

804.55

B.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City  
Washington

State  
DC

Zip Code  
20058

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03680

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

43.65

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Yahoo.com

Mailing Address 701 First Avenue

City  
Sunnyvale

State  
CA

Zip Code  
94089

Purpose of Disbursement  
Email

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03679

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

19.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

804.55

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

McAfee.com

Mailing Address 3695 Freedom Drive

City Santa CLara State CA Zip Code 95054

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03681

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

39.99

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Colonial Parking, Inc.

Mailing Address 1050 Thomas Jefferson Street NW  
Suite 100

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03682

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Miss Saigon

Mailing Address 3057 M ST NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03683

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

74.90

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City  
Washington

State  
DC

Zip Code  
20058

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02027-03684

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2008

Amount of Each Disbursement this Period

387.02

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Detroit Metro McNama Parking

Mailing Address Detroit Metro Airport

City  
Detroit

State  
MI

Zip Code  
48174

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02027-03685

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2008

Amount of Each Disbursement this Period

12.00

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Go To Webinar.com

Mailing Address 6500 Hollister Avenue

City  
Goleta

State  
CA

Zip Code  
93117

Purpose of Disbursement  
Conference Call

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02027-03686

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2008

Amount of Each Disbursement this Period

99.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
NewarkState  
NJZip Code  
07101-0114Purpose of Disbursement  
Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03687

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Amount of Each Disbursement this Period

35.00

**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Trend Micro E-Commerce

Mailing Address 10101 N. De Anza Blvd.

City  
CupertinoState  
CAZip Code  
95014Purpose of Disbursement  
Software

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02027-03678

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Amount of Each Disbursement this Period

79.00

**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

8243.52

Form/Schedule: **F3XN**

Transaction ID:

The Committee has very limited administrative expenses because it does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports.

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